

Testimony of : Gean Brown, RN, OCN

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In Support of: Bill 862; An Act Requiring Health Insurance Coverage for Lung Cancer Screening.

Insurance and Real Estate Committee

Chairman Crisco and Chairman Megna; members of the committee

My name is Gean Brown and I am a certified oncology nurse currently with Middlesex Hospital Cancer Center in Middletown, CT. I am the past president of the Central Ct. Oncology Nursing Society and a current board member. I have been an oncology nurse for 18 years and I am passionate about my field.

I am testifying today regarding the bill to require insurance coverage for lung cancer screening. As a patient advocate and a nurse who has started a lung cancer screening program already in Connecticut, I urge you to consider passing this bill.

I have come here today with patients who have gone through screening and had their lives saved and with another who wishes lung screening would have been available to her before this devastating disease impacted her life as it has. I ask that you think about all the people of our state who are at high risk for lung cancer because of smoking and not punish them for smoking, but offer them a screening low dose CAT scan that could potentially save their lives.

I would like to talk to you specifically about insurance and cost right now. An internationally recognized actuarial consulting firm; Milliman, Inc. published a cost benefit analysis which showed that screening 50-64 year olds at high risk for lung cancer with low-dose CT scans can save more lives, and at a lower cost than commonly used screening methods for other cancers. Specifically, mammography for breast cancer and colonoscopy for colorectal cancer. Milliman focused its analysis on the cost and benefit of screening a commercially insured population of high-risk 50-64 year olds. The data indicated that CT screening would avoid 15,000 deaths a year in that population alone. Screening high risk populations older than 64 would save an even higher number of lives each year.

The cost per life-year saved, which is a commonly used measurement of public health value, is under \$19,000. By comparison, the cost per life year saved for mammography screening is \$31,000 - \$51,000 and for colorectal screening is \$19,000 - \$29,000. Insurance coverage cost to employers in 2012 when this study was completed, cost on an average of \$300 per month or more for each person covered. The cost of adding CT screening would be \$0.76 per member per month. I ask you to consider the cost of chemotherapy and radiation therapy which is astronomical. We need to diagnose lung cancer early when there is a chance for a cure.

I would also like to speak about smoking cessation and note that current smokers who go through the Middlesex Hospital Lung Cancer Screening Program are given information about smoking cessation. Please note however that smokers who quit smoking decades ago continue to be at high risk of lung cancer. And may I say loud and clear, NO ONE DESERVES TO DIE OF LUNG CANCER.

Thank you for the opportunity to speak with you today on this important issue and I ask that you support the bill requiring health insurance coverage for lung cancer screening, many lives depend on it.

Reference

Pyenson, B.S., Sander, M.S., Jiang, Y., Kahn, H., and Mulshine, J.L., (2012) An Actuarial Analysis Shows That Offering Lung Cancer Screening As An Insurance Benefit Would Save Lives At Relatively Low Cost, *Health Affairs*, 31, no.4: 770-779 Doi: 10.1377/hlthaff.2011.0814